

ISSUE SLIP STAPLE AREA (for additional cross references)

POSTAL	INITIALS	ID NO.	DATE
	RH		3119
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ET	926 ¹⁰	4-10-01
RESPONSE FORMALITY REVIEW			05-22-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy